Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN			
			(Column 1)		(Column 2)		TYPE	TYPE			SMALL	SMALL ENTITY	
TOTAL CLAIMS							RATI		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	EE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			22 minus 20=		* 2		X\$ 9	-		OR	X\$18=		
INDEPENDENT CLAIMS			ン minus 3 =		*		X42:	=		OR	X84=		
MU	LTIPLE DEPEND	DENT CLAIM PF	RESENT	,			+140	=		OR	+280=		
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	TOTA	Ĺ		OR	TOTAL		
CLAIMS AS AMENDED - PART II								•		•	OTHER		
		(Column 1)	(Column 2)			(Column 3)				OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 22	Minus	* C	32	=	X\$ 9	=		OR	X\$18=		
	Independent	· 2	Minus	***	T CLANA	= 4	X42	=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. II		OR	+280=		
								TAL		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)									911		:	£	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent		Minus	***	.,	=	X42	=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	IT CLAIM		+140)=		OR			
								TAL		OR	TOTAL		
		(Oal 4)		(Cal	.mn (1)	(Column 2)	ADDIT.	-EE			ADDIT. FEE		
		(Column 1) CLAIMS			umn 2) HEST	(Column 3)			ADDI	1		ADDI	
AMENDMENT C		REMAINING AFTER AMENDMENT		NU PREV	MBER (IOUSLY D FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	X42			OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+280=		
	If the entry in colu	ımn 1 je lace than	the atry in col	umn 2. wi	rite "O" in ca	olumn 3.	+140			OR	TOTAL		
* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											ADDIT. FEE		
	The "Highest Nur	mber Previously Pa	aid For (Total o	or Indepe	ndent) is th	e highest number	er found in th	e ap	propriate b	x in c	olumn 1.		